



# MEDI-CAL UPDATE

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www.medi-cal.ca.gov

Pharmacy Bulletin 625

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## Medi-Cal List of Contract Drugs

The following provider manual sections have been updated: *Drugs: Contract Drugs List Part 1 – Prescription Drugs* and *Drugs: Contract Drugs List Part 4 – Therapeutic Classifications Drugs*.

Addition, effective March 1, 2006

<u>Drug</u>	<u>Size and/or Strength</u>	<u>Billing Unit</u>
<u>DULOXETINE HCL</u>		
<u>Capsules</u>	<u>20 mg</u>	<u>ea</u>
	<u>30 mg</u>	<u>ea</u>
	<u>60 mg</u>	<u>ea</u>

Changes, effective February 18, 2006

<u>Drug</u>	<u>Size and/or Strength</u>	<u>Billing Unit</u>
GLIMEPIRIDE		
±Tablets	1 mg	ea
	2 mg	ea
	4 mg	ea
(NDC labeler code 00039 [AVENTIS PHARMACEUTICALS] only.)		
* ZIDOVUDINE		
Tablets	300 mg	ea
Capsules	100 mg	ea
Liquid	50 mg/5cc	cc
Injection	10 mg/cc	cc
* Restricted to use as combination therapy in the treatment of Human Immunodeficiency Virus (HIV) infection. (NDC labeler code 00173 [GlaxoSmithKline] for capsules, liquid and injection only.)		

Please see **Contract Drugs**, page 3

**EDS/MEDI-CAL HOTLINES**

Border Providers .....	(916) 636-1200
CDHS Medi-Cal Fraud Hotline .....	1-800-822-6222
Telephone Service Center (TSC) .....	1-800-541-5555
Provider Telecommunications Network (PTN) .....	1-800-786-4346

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*For a complete listing of specialty programs and hours of operation, please refer to the Medi-Cal Directory in the provider manual.*



***OPT OUT** is a new service designed to save time and increase Medi-Cal accessibility. A monthly e-mail containing direct Web links to current bulletins, manual page updates, training information, and more is now available. Simply “opt-out” of receiving this same information on paper, through standard mail. To download the OPT-OUT enrollment form or for more information, go to the Medi-Cal Web site at [www.medi-cal.ca.gov](http://www.medi-cal.ca.gov), and click the “Learn how...” OPT OUT link on the right side of the home page.*

## Stop Illegal Tobacco Sales

The simplest way to stop illegal tobacco sales to minors is for merchants to check ID and verify the age of the tobacco purchasers. Report illegal tobacco sales to 1-800-5-ASK-4-ID.

**For more information, see the California Department of Health Services Web site at <http://www.dhs.ca.gov>.**

## MEDI-CAL FRAUD IS AGAINST THE LAW

**MEDI-CAL FRAUD COSTS TAXPAYERS MILLIONS  
EACH YEAR AND CAN ENDANGER  
THE HEALTH OF CALIFORNIANS.**

**HELP PROTECT MEDI-CAL AND YOURSELF  
BY REPORTING YOUR OBSERVATIONS TODAY.**

**CDHS MEDI-CAL FRAUD HOTLINE  
1-800-822-6222**

**THE CALL IS FREE AND YOU CAN REMAIN ANONYMOUS.**

Knowingly participating in fraudulent activities can result in prosecution and jail time. Help prevent Medi-Cal fraud.

**Contract Drugs** (*continued*)**Changes, effective March 1, 2006**

<b><u>Drug</u></b>	<b><u>Size and/or Strength</u></b>	<b><u>Billing Unit</u></b>
PAPAIN AND UREA Ointment		Gm
(NDC labeler codes 00064 [Healthpoint, LTD], 59366 [Glades Pharmaceuticals], 50484 [Smith & Nephew, Inc.] <b><u>and 58980 [Stratus Pharmaceuticals]</u></b> only <b><u>until April 30, 2006.</u></b> )		
<b><u>(Effective May 1, 2006 NDC labeler codes 50484 [Smith &amp; Nephew, Inc.] and 58980 [Stratus Pharmaceuticals] only.)</u></b>		
PAPAIN-UREA-CHLOROPHYLLIN COPPER COMPLEX SODIUM Ointment	30 Gm	Gm
(NDC labeler code 00064 [Healthpoint, Ltd.], <b><u>50484 [Smith &amp; Nephew, Inc.] and 58980 [Stratus Pharmaceuticals]</u></b> only <b><u>until April 30, 2006.</u></b> )		
<b><u>Effective May 1, 2006 NDC labeler codes 50484 [Smith &amp; Nephew, Inc.] and 58980 [Stratus Pharmaceuticals] only.)</u></b>		
* Spray	33 cc	cc
<b><u>* Prior authorization always required.</u></b>		

These updates are reflected on manual replacement pages drugs cdl p1a 46 (Part 2), drugs cdl p1b 19 (Part 2), drugs cdl p1c 14 and 15 (Part 2) and drugs cdl p1d 23 (Part 2).

**FAC List Updates**

The *Drugs: MAIC and FAC List* section has been updated with the *Federal Allowable Cost (FAC) List* changes as noted below:

**Additions, effective February 18, 2006**

<b><u>Drug</u></b>	<b><u>Strength</u></b>	<b><u>FAC</u></b>	<b><u>Billing Unit</u></b>
Alclometasone Dipropionate Cream or Ointment	0.05%	\$0.8283	GM
Gabapentin Tablets	600mg 800mg	2.4704 2.9586	ea ea
Glimepiride Tablets	1mg 2mg 4mg	0.1341 0.2174 0.4100	ea ea ea
Glyburide Tablets	1.25mg 2.5mg 5mg	0.1244 0.1893 0.2831	ea ea ea
Halobetasol Propionate Cream	0.05%	1.4766	GM

Please see **FAC List Updates**, page 4

**FAC List Updates** *(continued)***Additions, effective February 18, 2006 (continued)**

<b><u>Drug</u></b>	<b><u>Strength</u></b>	<b><u>FAC</u></b>	<b><u>Billing Unit</u></b>
Isoniazid Tablets	100mg	\$0.0561	ea
Leflunomide Tablets	10mg	2.5000	ea
	20mg	2.5000	ea
Metformin Hydrochloride Tablets	750mg	1.1498	ea
Mupirocin Ointment	2%	1.8839	GM
Tretinoin Cream	0.025%	1.5693	GM
Zidovudine Tablets	300mg	3.6503	ea

**Increases, effective February 18, 2006**

<b><u>Drug</u></b>	<b><u>Strength</u></b>	<b><u>FAC</u></b>	<b><u>Billing Unit</u></b>
Chlorpropamide Tablets	100mg	\$0.2325	ea
	250mg	0.4917	ea
Desipramine Hydrochloride Tablets, oral	25mg	0.2835	ea
Hydroxyzine Pamoate Capsules	25mg	0.1150	ea
	50mg	0.1572	ea

**Decreases, effective February 18, 2006**

<b><u>Drug</u></b>	<b><u>Strength</u></b>	<b><u>FAC</u></b>	<b><u>Billing Unit</u></b>
Citalopram Hydrobromide Tablet, oral	10mg	\$0.2963	ea
	20mg	0.3090	ea
	40mg	0.3224	ea
Glyburide Tablets	1.5mg	0.1875	ea
	3mg	0.2175	ea

*Please see FAC List Updates, page 5*

**FAC List Updates** (*continued*)**Deletions, effective February 18, 2006**

<b><u>Drug</u></b>	<b><u>Strength</u></b>	<b><u>FAC</u></b>	<b><u>Billing Unit</u></b>
Cefaclor			
Capsules	250mg	\$0.6600	ea
	500mg	1.2900	ea
Suspension	125mg/5 cc-150 cc	0.0980	cc
	187mg/5 cc-100 cc	0.1470	cc
	250mg/5 cc-150 cc	0.2995	cc
	375mg/5 cc-100 cc	0.4492	cc
Fluorometholone			
Ophthalmic suspension	0.1%	1.6590	cc
Tolazamide			
Tablets	250mg	0.4005	ea

*These changes are reflected on manual replacement pages drugs maic fac 2, 8 thru 10, 12, 16, 18, 19, 21, 22, 25, 27, 36 and 38 (Part 2).*

**Diabetic Medical Supplies Additions**

Effective for dates of service on or after March 1, 2006, the following Becton, Dickinson and Company and Owen Mumford USA, Inc.-contracted diabetic supplies have been added to the *Medical Supplies List* section.

<b><u>Description</u></b>	<b><u>Billing Code</u></b>	<b><u>Bill Quantity in Total Number of</u></b>
BD Test Strips (100-ct)	08290322054	Strip
Unistik 2, single use device, orange, 3.0 MM depth (50)	08470071001	Lancet
Unistik 2, single use device, yellow, 2.4 MM depth (50)	08470070001	Lancet
Unistik 2, single use device, burgundy, 3.0 MM depth (100)	08470075201	Lancet
Unistik 2, single use device, orange, 3.0 MM depth (100)	08470071201	Lancet
Unistik 2, single use device, yellow, 2.4 MM depth (100)	08470070201	Lancet
Unistik 2, single use device, yellow, 2.4 MM depth (200)	08470070401	Lancet
Unistik 2, single use device, orange, 3.0 MM depth (200)	08470071401	Lancet

Test Strips are limited to no more than 200 strips per dispensing/claim with a therapy duration limit of four dispensings in 90 days, per recipient, without prior authorization.

Lancets are limited to no more than 200 lancets per dispensing/claim with a therapy duration limit of four dispensings in 90 days, per recipient, without prior authorization.

These products are reimbursable to Pharmacy providers only and must be billed using the Point of Service (POS) network, Computer Media Claims (CMC) or paper.

*This information is reflected on manual replacement pages mc sup lst1 16 and 20 (Part 2).*

### Incontinence Medical Supplies Additions

Effective for dates of service on or after January 1, 2006, the following Midwest Medical Supply, LLC-manufactured adult briefs have been added to the Medi-Cal list of contracted incontinence medical supplies. The same quantity restrictions apply as for all adult briefs incontinence supplies. The manufacturer code for Midwest Medical Supply, LLC, is “2K.”

<u>Description/Size</u>	<u>Manufacturer Stock Number</u>	<u>Medi-Cal Billing Code</u>
<b>Youth</b>		
Adult Briefs Extra Full Mat	60001MMS	9997Q 2K
Adult Briefs Super Full Mat	60031MMS	9997Q 2K
<b>Small</b>		
Adult Briefs Extra Full Mat	60002MMS	9997T 2K
Adult Briefs Super Full Mat	60032MMS	9997T 2K
Institutional	1066MMS	9997T 2K
<b>Medium</b>		
Adult Brief Heavy Trim Mat	60043MMS	9997W 2K
Adult Briefs Extra Full Mat	60003MMS	9997W 2K
Adult Briefs Super Full Mat	60033MMS	9997W 2K
Adult Briefs Supreme Trim Mat	9501MMS	9997W 2K
Institutional	1076MMS	9997W 2K
<b>Large</b>		
Adult Brief Heavy Trim Mat	60044MMS	9997Y 2K
Adult Briefs Extra Full Mat	60004MMS	9997Y 2K
Adult Briefs Super Full Mat	60034MMS	9997Y 2K
Adult Briefs Supreme Trim Mat	9502MMS	9997Y 2K
Institutional	1086MMS	9997Y 2K
<b>X-Large</b>		
Adult Brief Heavy Trim Mat	60045MMS	9907M 2K
Adult Briefs Extra Full Mat	60010MMS	9907M 2K
Adult Briefs Super Full Mat	60035MMS	9907M 2K
Institutional	1096MMS	9907M 2K

The updated information is reflected on manual replacement pages incont lst 2 thru 4, 6, 10 and 13 (Part 2).

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Remove and replace:	drugs cdl p1a 45/46 drugs cdl p1b 19/20 drugs cdl p1c 13 thru 16
Remove:	drugs cdl p1d 23
Insert:	drugs cdl p1d 23/24
Remove and replace:	drugs cdl p4 5/6, 9/10 drugs maic fac 1/2, 7 thru 12, 15 thru 22, 25 thru 28, 35 thru 38
Remove:	incont lst 1 thru 30
Insert:	incont lst 1 thru 27
Remove and replace:	mc sup lst1 15/16, 19/20